pplication	or	Docket	١	Number
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## PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2000

03768 / 9375

CLAIMS AS FILED - PART I (Column 1)				(Column 2) SMALL ENTITY		NTITY	OTHER THAN OR SMALL ENTITY					
TOTAL CLAIMS		29				1	RATE	FEE		RATE	FEE	
FOR		NUMBER	R FILED NUME		ER EXTRA		BASIC FEE	355.00	OR	BASIC FEE	710.00	
TOTAL CHARGEABLE CLAIMS			2 9 minus 20= * 9				X\$ 9=		OR	X\$18=	162	
INDEPENDENT CLAIMS 5 minus 3			nus 3 =	0			X40=		OR	X80=	0	
MULTIPLE DEPENDENT CLAIM PRESENT				•			+135=	,	OR	+270=		
* If the difference in column 1 is less than zero,				ero, enter	"0" in c	olumn 2		TOTAL		OR	TOTAL	872
CLAIMS AS AMENDED - PART II							•	( ) ( ) ( ) ( ) ( )			OTHER	THAN
(Column 1) (Column 2) (Column 3)							_	SMALLE	NTITY .	OR	SMALL	ENTITY
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUMI PREVIO PAID	BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE	ş.	RATE	ADDI- TIONAL FEE
MQN	Total	.01	Minus	2	50			X\$ 9=		OR	X\$18=	
AME	Independent	NTATION OF MU	Minus	*** F	CLAIM			X40=		OR	X80=	84
	TINOT PRESE	NIATION OF MIC	OCHIPEE DEF	ENDEN	CLAIN			+135=	-	OR	+270=	
٠		·				•		TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	
		(Column 1)		(Colur	mn 2)	(Column 3)	i .	DDN. FEE L			ADDII. FEE	
AMENDMENT B		CLAIMS		HIGH	EST		1 [		ADDI-		11 22 1	ADDI-
		REMAINING AFTER AMENDMENT	te a transport port a traditional transport and a support for the	NUM PREVIO PAID	DUSLY	PRESENT EXTRA		RATE	TIONAL FEE		RATE	TIONAL FEE
NDN	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
AME	Independent	* NTATION OF MU	Minus	***	CL AINA	=	4 [	X40=	•	OR	X80=	
	FIRST PRESE	NIATION OF MI	ULTIPLE DEF	ENDEN	CLAIM		<b>」</b> [	+135=	* "*.	OR.	+270=	
'.				;	s.r	·	, L	TOTAL ADDIT: FEE		OR	TOTAL ADDIT. FEE	
		(Column 1)		(Colu	mn 2)	(Column 3)			•	5.		
AMENDMENT C	:	CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	IEST IBER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
NDM	Total	•	Minus	**	·	=		X\$ 9=		OR	X\$18=	, , , , , , , , , , , , , , , , , , ,
ME	Ind pendent		Minus	•••		<u> </u> =	<b>』</b>	X40=	7	OR	X80=	·
Ľ	FIRST PRESE	NTATION OF M	ULTIPLE DE	PENDEN	T CLAIM		<b>┧</b> ┟					
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.												
**	** If the entry in column 1 is less than the entry in column 2, write "O" in column 3.  ** If the "Highest Numb r Pr viously Paid For" IN THIS SPACE is less than 20, enter "20."  ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  The "Highest Number Previously Paid F r" (Total or Independent) is the highest number found in the appropriate box in column 1.											